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SECRETARY OF STATE

## COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	T: SAMBA LLC (Name of Limited Liability Company)			
The enc	osed Articles of Organization and fee(s) are submitted for filing.			
Please r	turn all correspondence concerning this matter to the following:  RENATA SWAIN  (Name of Person)	-		
(Firm/Company)				
3261 BENEVA ROAD, #104				
-	SARASOTA, FL. 34232 (City/State and Zip Code)	-		
For furt	er information concerning this matter, please call:			
<u>Ni</u>	WE S.A. STAROSTECKI at (352) 562-1855  (Name of Person) (Area Code & Daytime Telephone Number)			
<b>30</b>	d is a check for the following amount:  D Filing Fee \$\sum_{130.00}\$ Filing Fee & \$\sum_{155.00}\$ Filing Fee & \$\sum_{160.00}\$ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	1)		
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2008

RENATA SWAIN 3261 BENEVA ROAD, #104 SARASOTA, FL 34232

SUBJECT: SAMBA, LLC Ref. Number: W08000010607

We have received your document for SAMBA, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L06000114495.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 408A00012543

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lightlity Company is:				
The name of the Limited Liability Company is:  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:  Slele S. Pelican Deive ( SARASOTA, FZ 34237	SAME			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are:  Nicole S. A. Statostecki  Slole S. Pelican Dreve  Florida street address (P.O. Box NOT acceptable)  APASOTA FL 34237  City, State, and Zip				
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S				
Registered Agent s-Signature (Ri  (CONTINUED)  Page 1 of 2	008 HAR 18 SECRETAR) ALLAHASSI			

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member	L. O. A. O.C.			
MGRM	Nicole S. Fl. Starostecki 566 S. Pelican Deve			
MARM	RENATA SWAIN SCOLO S. PELICAN DR.			
,	SAPASOTA, FL 34237			
N/A	: *X/A			
1				
<u> N/A</u>	.N/A			
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)				
REQUIRED SIGNATURE:				
Signature of a member of an authorized representative of a member.				
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are true.				

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)